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## UTILITY **PATENT APPLICATION TRANSMITTAL**

Attomey Docket No. 367.38234X00 First Inventor or Application Identifier Paivi PUKKILA, ET AL.

Title A HANDSET

Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Express Mail Label No.

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application content	Assistant Commissioner for Patents  ADDRESS TO: Box Patent Application  Washington, DC 20231					
1. X * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)  2. X Specification [Total Pages] 24.  - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure  3. X Drawing(s) (35 U.S.C. 113) [Total Sheets] 4. Oath or Declaration [Total Pages]  a. Newly executed (original or copy)  b. Copy from a prior application (37 C.F.R. (for continuation/divisional with Box 16 completing inventor(s) named in the prior application of the prior application the prior	5. Microfiche Computer Program (Appendix)  6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. Computer Readable Copy  b. Paper Copy (identical to computer copy)  c. Statement verifying identity of above copies  ACCOMPANYING APPLICATION PARTS  7. Assignment Papers (cover sheet & document(s))  8. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee)  9. English Translation Document (if applicable)  10. X Statement (IDS)/PTO-1449  11. X Preliminary Amendment  12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)  13. Statement(s) Statement filed in prior application Status still proper and desired (PTO/SB/09-12)  14. X (if foreign priority is claimed)  15. Other:					
16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:  Continuation Divisional Continuation-in-part (CIP) Of prior application No:  Prior application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
17. CORRES	ONDENCE ADDRESS					
Customer Number or Bar Code Labe l (Insert Customer N	020457 or Correspondence address below o. or Attach bar code label here)					
Name	•					
Address						
City	tate Zip Code					
Country Teleph	ne Fax					
Name (Print/Type) Carl I Brundidge Signature	Registration No. (Attorney/Agent) 29,621  Date 2/22/2000					

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PTO/SB/17 (12/98)
Approved for use through 9/30/2000. OMB 0651-0032
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FEE TRANSMITTAL		Co	PT	
I EL INANS		Application Number		
for FY 1	999	Filing Date	February 22, 2000	0.0
Patent fees are subject to annual revision.	First Named Inventor	Paivi PUKKILA, ET AL.	24	
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.		Examiner Name		16625 U
otherwise range entity rees must be paid. See Forms F10/36/09-12.	Group / Art Unit		j	
TOTAL AMOUNT OF PAYMENT (\$	(\$)918.00	Attorney Docket No.	367.38234X00	
METHOD OF DAVMENT	(ah a ah a a a)	FFF 0/	M CILL A TION (continued)	

The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account   O1-2135	METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)					
Actional   Number   Deposit   Antonelli, Terry, Stout & Kraus, LLP   Number   Deposit   Deposit   Deposit   Deposit   Deposit   Deposit   Deposit   Depo	1. La indicated fees and credit any over payments to:	Large Fee	Entity Fee	Smal Fee	I Entity Fee		Fee Paid
Name	Account   01-2135				,	Surcharge - late filing fee or oath	0.00
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147   2,520   147   147   147   147   147   147   147   147   147   147   147   147   147   147   147   147   147   147   147	Name	139	130	139	130	Non-English specification	0.00
2.     Payment Enclosed:	Fee Required Under	147	2,520	147	2,520	For filing a request for reexamination	<del></del>
Total Claims   Subtrotal (1)   Subtrotal (1)   Subtrotal (2)   Subtrotal (1)   Subtrotal (2)		112	920*	112	920*		0.00
1. BASIC FILLING FEE   117   870   217   435   245	Z. Check Money Other	113 1	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	0.00
1. BASIC FILING FEE   Large Entity Small Entity   Fee   Fe						Extension for reply within first month	0.00
Large Entity Small Entity Fee Fee Fee Fee Paid Code (\$)   Code (		-116	380	216	190	Extension for reply within second month	0.00
Fee		117	870	217		Extension for reply within third month	0.00
101 760 201 380 Utility filing fee	Fee Fee Fee Fee Fee Description Fee Paid	118	1,360	218	680	Extension for reply within fourth month	0.00
106 310 206 155   Design filling fee   170 480 207 240   Plant filling fee   120 300 220 150   Filling a brief in support of an appeal   0.00	104 760 201 200 Hilliby filing for	128	1,850	228	925	Extension for reply within fifth month	0.00
107   480   207   240   Plant filling fee   120   300   220   150   Filling a brief in support of an appeal   0.00   0.00   121   260   221   130   Request for oral hearing   0.00	090.00	119	300	219	150	Notice of Appeal	0.00
108 760 208 380 Reissue filing fee	l.	120	300	220	150	Filing a brief in support of an appeal	0.00
114   150   214   75   Provisional filing fee   SUBTOTAL (1)   (\$) 690.00   140   110   240   55   Petition to revive - unavoidable   0.00		121	260	221	130	Request for oral hearing	0.00
SUBTOTAL (1) \$ 690.00  2. EXTRA CLAIM FEES  Extra Claims below below lidependent		138	1,510	138	1,510	Petition to institute a public use proceeding	0.00
2. EXTRA CLAIM FEES  Extra Claims	·	140	110	240	55	Petition to revive - unavoidable	0.00
Total Claims 24 -20** = 4	SUBTOTAL (1) (\$) 690.00	141	1,210	241	605	Petition to revive - unintentional	0.00
Extra Claims below Fee Paid Total Claims 24 -20** = 4		142	1,210	242	605	Utility issue fee (orreissue)	0.00
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Claims Multiple Dependent  "or number previously paid, if greater; For Reissues, see below Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Description 103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claims overoriginal patent 109 78 209 39 "Reissue indenpendent claims overoriginal patent 100 18 210 9 "Reissue claims in excess of 20 and overoriginal patent  122 100 123 50 Petitions related to provisional applications 126 240 126 240 Submission of Information Disclosure Stmt 127 100 123 50 123 50 Petitions related to provisional applications 128 240 126 240 Submission of Information Disclosure Stmt 129 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 Submission of Information Disclosure Stmt 120 240 126 240 126 240 126 240 Submission of Information Disclosur		144	580	244	290	Plantissue fee	0.00
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Fee		126	240	126	240	Submission of Information Disclosure Stmt	
103 18 203 9 Claims in excess of 20 102 78 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claims over original patent over original patent  109 18 210 9 "Reissue claims in excess of 20 and over original patent o	Fee Fee Fee Fee Description	581	40	581	40		
102 76 202 39 Independent claims in excess of 3 104 260 204 130 Multiple dependent claim, if not paid 109 78 209 39 "Reissue independent claims over original patent 0.00 110 18 210 9 "Reissue claims in excess of 20 and over original patent 0.00	***	146	760	246	380		0.00
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SUBTOTAL (2) (\$) 228.00 •Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00		Otherfe	ee (spe	cify)_			
	SUBTOTAL (2) (\$) 228.00 *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00						00

SUBMITTED BY			Complete (if applicable)		
Typed or Printed Name   Carl L Brundidge			Reg. Number	29,621	
Signature		Date	2/22/2000	Deposit Account User ID	01-2135

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